## ION Scanner Attachment 3

Electronic Drug Detection Equipment Shift Maintenance																							
Institution:					Facility:									Month/Year:									
SCI:				Mo	Model:									IONSCAN S/N:									
Day of the Week:	y of the Week: SUN			N	MON			TUES			WED			THURS			FRI			SAT			
Maintenance	Initial	Date	R	Initial	Date	R	Initial	Date	R	Initial	Date	R	Initial	Date	R	Initial	Date	R	Initial	Date	R		
Duties: Inspect/Clean Cabinet Fan Filter																							
Inspect/Clean Bronze Inlet Filter																							
Inspect/Replace Air Purification Unit (APU)																							
Inspect/Replace Condenser Tube																							
Inspect Printer, Ink Cartridge, Paper, Cables																							
Description of Problem / Action	s Taken:		<u> </u>			<u> </u>			<u> </u>			<u> </u>											
Notes:																							
1: Date and initial when action is	norformo	4																					
2: Check the letter <b>R</b> in the colum			renl	acement	is accon	nnliel	hed																
3: If any corrective maintenance i								sure th	at th	e repair a	action is	reai	iested an	d loane	d.								
o. Il ally corrective maintenance i	o . cquii cc	~ ***	55110		a control of the			Juic III	<b>41 111</b>	o repun t	201101113	· cqc	accica an	~ logge	<b>.</b>								